PTO/SB/17 (12-04v2)

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TRADEMARKS	

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E55-45-1 40/00/	2004	Complete if Known				
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number	09/894,214-Conf. #004819			
FEE TRANSI	MITTAL	Filing Date	June 27, 2001			
		First Named Inventor	Hideki INOMATA			
For FY 20	SMITTAL Filing D 2005 status. See 37 CFR 1.27 Applica Filing D First Na Examina Art Unit	Examiner Name	T. T. Vo			
Applicant claims small entity statu	us. See 37 CFR 1.27	Art Unit	2613			
TOTAL AMOUNT OF PAYMENT	(\$) 910.00	Attorney Docket No.	0649-0810P			
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METHOD OF PAYME	NT (check all the	nat apply)						
X Check Credit	Card M	Ioney Order	None	Other (please identi	fy):		
Deposit Account De	oosit Account Numb	er: 02-2448	Deposit Accour	it Name:	Birch, Stev	wart, Kolasch	& Birch, I	LLP
For the above-ide	ntified deposit a	ccount, the D	irector is he	ereby authorize	d to: (check	(all that apply)		
	s) indicated bel					cated below, ex	cept for t	he filing fee
	additional fee(s		ment of		` ,		•	
	37 CFR 1.16		THO THE OF	x Credit	any overpa	yments		
FEE CALCULATION				_				
1. BASIC FILING, SEARC	-							
		S FEES	SEAR	CH FEES Small Entity	EXAMIN	ATION FEES Small Entity		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees	Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (inclu	-						50	25
Each independent claim o		g Reissues)					200	100
Multiple dependent claim							360	180
Total Claims								
1520=	<u> </u>	= _			Fee	<u>: (\$)</u> <u>F</u>	ee Paid (<u>5)</u>
Indep. Claims Extra	a Claims F	ee (\$)	Fee Pai	d (\$)				
3 -3=	0 x	=	i ce i ai	u (#)				
3. APPLICATION SIZE FE		_						
If the specification and d	rawings exceed							
listings under 37 CFR	1.52(e)), the a	pplication siz	ze fee due i	s \$250 (\$125 f	or small en	tity) for each ac	lditional 5	0
sheets or fraction ther							_	
	Extra Sheets			itional 50 or frac			Fee	Paid (\$)
		/50	(rc	ound up to a who	ie number) x	· :	- <u> </u>	Paid (\$)
4. OTHER FEE(S)	tion \$130 fee	(no small en	tity discour	nt)			rees	Palu (3)
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00								
Onici (e.g., late filling	12	51 Extensio	n for respo	onse within fir	st month		1;	20.00
SUBMITTED BY		_// /			-		-	
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SUBMITTED BY	00//1		_		
Signature	MALL	Registration No. (Attorney/Agent)	39,491	Telephone	(703) 205-8000
Name (Print/Type)	Michael R. Cammarata			Date	August 19, 2005